

FILE COPY

STATE OF WISCONSIN  
BEFORE THE MEDICAL EXAMINING BOARD

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IN THE MATTER OF  
DISCIPLINARY PROCEEDINGS AGAINST

PETER W. GOY, M.D.,

Respondent

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ORDER GRANTING STAY

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On October 22, 1997, the Medical Examining Board issued its Final Decision and Order in the above-captioned matter. By the terms of the board's order, respondent's license to practice medicine and surgery in Wisconsin was suspended for a period of not less than five years, with provision for consecutive three month stays of the suspension contingent upon compliance with a number of conditions and limitations on the license. Among other conditions, Dr. Goy was required to enroll and successfully participate in a drug and alcohol treatment program satisfactory to the board, including participation in individual or group therapy on at least a weekly basis; to participate in AA or NA meetings at least once per week; to submit to drug and alcohol screens on a twice-weekly basis; to be responsible for submission of quarterly practice and therapy reports; and to participate in continuing education in prescribing controlled substances and in record-keeping.

Pursuant to the board's Order, Dr. Goy appeared before the board at its meeting of January 22, 1998, in support of his request for a further three month stay of the suspension. The board considered the request on that date, and granted the stay.

The board considered Dr. Goy's request for a further stay at its meeting of April 22, 1998. Based upon respondent's request, and upon all other information of record herein, the board orders as follows:

ORDER

NOW, THEREFORE, IT IS ORDERED that the stay of the suspension of the license of Peter W. Goy, M.D. is extended for an additional period of three months.

Dated this 6th day of May, 1998. <sup>9</sup>

STATE OF WISCONSIN  
MEDICAL EXAMINING BOARD

by Wanda Roever  
Wanda Roever  
Secretary of the Board

STATE OF WISCONSIN  
DEPARTMENT OF REGULATION AND LICENSING  
BEFORE THE MEDICAL EXAMINING BOARD

In the Matter of Disciplinary Proceedings Against

Peter W. Goy, M.D.,

AFFIDAVIT OF MAILING

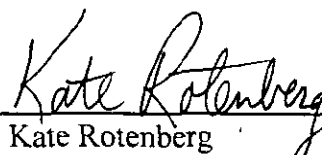
Respondent.

STATE OF WISCONSIN    )  
                                  )  
COUNTY OF DANE        )

I, Kate Rotenberg, having been duly sworn on oath, state the following to be true and correct based on my personal knowledge:

1. I am employed by the Wisconsin Department of Regulation and Licensing.
2. On May 15, 1998, I served the Order Granting Stay dated May 6, 1998, upon the Respondent Peter W. Goy, M.D. by enclosing a true and accurate copy of the above-described document in an envelope properly stamped and addressed to the above-named Respondent and placing the envelope in the State of Wisconsin mail system to be mailed by the United States Post Office by certified mail. The certified mail receipt number on the envelope is P 221 158 891.
3. The address used for mailing the Decision is the address that appears in the records of the Department as the Respondent's last-known address and is:

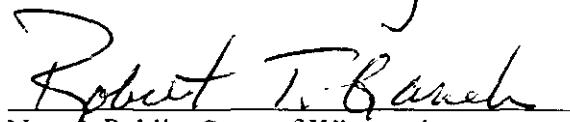
Peter W. Goy, M.D.  
N84W16889 Menomonee Avenue  
Menomonee Falls WI 53051



Kate Rotenberg  
Department of Regulation and Licensing  
Office of Legal Counsel

Subscribed and sworn to before me

this 15th day of May, 1998.



Notary Public, State of Wisconsin  
My commission is permanent